WASHINGTON STATE TITLE IV-E DEMONSTRATION PROJECT

SEMI-ANNUAL PROGRESS REPORT: JANUARY-JUNE 2016

WASHINGTON
DEPARTMENT OF
SOCIAL AND
HEALTH SERVICES
CHILDREN'S
ADMINISTRATION

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I. Overview

Washington State passed legislation in 2012 requiring differential response in the state's public child welfare administration. On January 1, 2014, Children's Administration (CA) began providing CPS-FAR, the differential response to a CPS investigation, in three locations: Aberdeen, Lynnwood, and two zip codes in Spokane. Since then CA has implemented CPS-FAR in an additional 29 offices across the state.

Status of CPS-FAR Implementation

As of June 30, 2016, CA has implemented CPS-FAR in the following 32 offices:

Rural Central Washington

- 1. Ellensburg
- 2. Sunnyside
- 3. Moses Lake

Northwest Washington

- 4. Mount Vernon
- 5. Oak Harbor

Tacoma

- 6. Pierce East
- 7. Pierce West
- 8. Lakewood

Rural Eastern Washington

- 9. Colville
- 10. Newport
- 11. Republic

Western Washington

- 12. Lynnwood
- 13. Sky Valley
- 14. Smokey Point
- 15. Bremerton
- 16. Vancouver
- 17. Stevenson
- 18. Aberdeen
- 19. Kelso

Washington Coast

- 20. Long Beach
- 21. South Bend
- 22. Forks
- 23. Port Townsend
- 24. Port Angeles

Seattle

- 25. Martin Luther King Jr.*
- 26. King East*

Eastern Washington

- 27. Spokane
- 28. Lincoln County
- 29. Walla Walla
- 30. Richland
- 31. Clarkston
- 32. Colfax

*The Office of Indian Child Welfare (OICW) provides CPS-FAR to Native American families in these two locations.

Implementation of CPS-FAR in the remaining offices was paused in June 2015 during this reporting period when the budget passed by the Washington State legislature in 2015 did not include funding for FAR. The 2016 state budget did include funding for FAR and CA resumed with implementation in July 2016 of the CPS-FAR in the remaining offices.

Readiness work for the next set of offices began in March 2016. This work involves an office readiness assessment, identifying CPS-FAR staff, hiring of staff (as needed), communication with local community partners and stakeholders, deliberate efforts to get caseloads reduced prior to launch, and training of CPS-FAR caseworkers.

On July 25, 2016, CPS-FAR was launched in the following five offices in: Toppenish; Goldendale; Centralia; Shelton; and Tumwater. These offices were well- prepared for the launch. Implementation will continue in the remaining offices under the following schedule:

• October 24, 2016: King West and White Center

January 30, 2017: Wenatchee, Omak, Everett and Bellingham
 April 24, 2017: Yakima, King Southeast and King Southwest

CPS-FAR Intake Data

CA has tracked CPS intake data since January 2014. Because the intake screening tool was updated and implemented in October 2013, this action has allowed for review of intakes that would be screened-in to CPS-FAR if the pathway were available. This data is collected at the point the screening decision is made by the intake worker. Intake supervisors change 5 – 10% of intake worker screening decisions. Supervisors change intake screening decisions for a number of reasons, including: family history of child abuse and neglect, additional information from collateral contacts, and disagreement with the intake worker's screening decision.

Data shows that cases are transferring from CPS-FAR to investigations 4.87% of the time. Cases transferring to investigations because of safety concerns are very close in number to the cases that transfer because the family declines participation in FAR. Dependency action was taken on almost 2% of the CPS-FAR families.

Statewide January – June 2016									
Month	Intakes Assigned to CPS-FAR	CPS-FAR cases Transferred to Investigations Due to Safety or Risk Concerns	Families who Declined to Participate in CPS-FAR (Transferred to Investigators)	Percent Transferred to Investigations Total	Dependencies Filed ¹	Percent Dependencies Filed Dependencies filed are counted by hand			
January	1,302	3.07%	3.46%	6.53%	6.53%	1.9%			
February	1,296	2.54%	2.24%	4.78%	4.78%	1.6%			
March	1,453	2.54%	2.55%	5.09%	5.09%	2.1%			
April	1,203	3.0%	2.99%	5.99%	5.99%	2.0%			
May	1,492	2.28%	1.88%	4.16%	4.16%	1.5%			
June	1,194	1.34%	1.34%	2.68%	2.68%	2.2%			
Total	7,940	2.5%	2.37%	4.87%	4.89%	1.9%			

II. Demonstration Activities, and Accomplishments

Training and Coaching

CPS-FAR training is developed and delivered via a partnership between CA and the Alliance for Child Welfare Excellence (the "Alliance") at the University of Washington School of Social Work. Caseworkers and

supervisors are surveyed after each training and the training is modified based on the feedback received. Child safety is at the core of this training.

Significant adjustments to CPS-FAR training were made during this reporting period. The adjustments included blending the two-day CA training with the three-day follow-up training provided by the Alliance. With the new blended curriculum, staff received specific policy and practice instruction followed by hands-on activities to support learning. In addition, training content was added or strengthened to improve content on child safety. Additional training changes were made to emphasize assessing other adults in the home, comprehensive interviews of children and caregivers, infant safe care, domestic violence, information gathering and safety planning. The new curriculum was piloted in June 2016. Feedback from the training was very positive.

Staff turnover has necessitated the scheduling of additional training sessions to train newly-hired staff in existing CPS-FAR offices. These sessions have also included CPS investigators to strengthen cross-training opportunities on CPS-FAR. Two special sessions were conducted during this review period, specifically March 29 - April 1, 2016, and June 27 - July 1, 2016.

The Kempe Center provided two sessions of leadership training in February 2016 which concludes this training. Almost all supervisors and area administrators statewide have participated in this training. The vast majority of supervisors who attended this training found it very helpful with some participants stating that this was the best leadership training they have attended. One of the goals of this training was to support and encourage an agency-wide culture shift focusing on coaching and mentoring caseworkers to support skill-building and increase competence.

Casey Leadership Forums were conducted in March 2016. Presenters Eric Fenner (Managing Director, Casey Family Programs) and Amy Wood (child welfare trainer and supervisor) facilitated two sessions, one for supervisors and one for extended leadership team members (area administrators, deputy and regional administrators, and executive management team members). The forums focused on leadership through change. While attendance at these forums was less than expected, feedback from those who attended was very positive.

Changes to CPS-FAR Practice and Policy

The CANS-F screener tool was eliminated as a CPS-FAR policy requirement effective April 1, 2016. Prior to eliminating the requirement, focus groups were conducted with CPS-FAR staff across the state to seek additional information on its value and effectiveness. The feedback was predominantly negative. Feedback also supported the assumption that staff were not using the CANS-F screener as an engagement tool with families. Staff also reported that the screener tool was not a useful tool in determining the need for services.

Planning is underway to pilot an engagement tool called "The Difference Game" in three CPS-FAR offices. This is a tool developed by the University of Washington and used by staff in their Parent-Child Assistance Program (PCAP) with mothers whose substance abuse is negatively impacting the parenting of their children. The Difference Game is a card-sorting tool which allows the client to identify what would make the most difference in their life. The choices include a broad array of services and concrete needs with one "wild" card. The goal of the pilot is to strengthen engagement between worker and client with use of a client-driven tool.

CA existing chronicity screening indicator has been adjusted so that a third accepted intake in a twelve-month period will screen to CPS investigation rather than CPS FAR. In addition, a new intake involving a child with a dismissal of a dependency case within 12 months will screen to CPS investigation. These two policy changes are effective July 1, 2016. The impact of these changes will be monitored to assess for office impacts. Staff adjustments may be needed, especially in larger offices.

Provision of Concrete Goods

CA contracted with agencies in each of the three regions to purchase, store, and distribute concrete goods to families and CA offices across the state. This is a new endeavor and, if successful, may be expanded to include all families we serve. CPS-FAR workers will be able to request necessary items for families, such as diapers, cribs, housekeeping supplies, lice kits, and beds that have been identified as needed to address safety or risk concerns. The contracted provider will deliver the items to the local CA office and/or directly to a family's home. Many of the families involved in CPS-FAR have many unmet basic needs. The intent of these contracts is to reduce barriers to obtaining these goods for families and streamline the process for distribution.

Targeted Case Review

The fourth CPS-FAR Targeted Case Review occurred March 21 - 25, 2016. Seventeen staff electronically reviewed a total of 332 cases, approximately two cases per CPS-FAR caseworker. The case sample consisted of 50% physical abuse and 50% neglect. The review period covered July 1, 2015 – February 22, 2016.

The reviewers included area administrators, The headquarters (HQ) CPS-FAR program manager and regional leads, CPS-FAR supervisors, the regional safety administrators, quality program specialists, and a Central Case Review Team member. Six staff completed secondary reviews on approximately 50% of the cases for quality assurance and consistency.

Practice Strengths

The practice areas below were identified as strengths with a review rating of 80% or higher.

- 1. Initial Face-to-Face (IFF) contact with all child victims
- 2. Safety Assessments
- 3. Collaborating with the mother
- 4. CPS-FAR Family Assessment

Areas Needing Improvement Related to Safety

The practice areas below are identified as areas needing improvement with a review rating result lower than 80%.

- 1. Assessment of other adults
- 2. Collateral contacts
- 3. Structured Decision Making tool completed accurately
- 4. Domestic Violence
- 5. Safe Sleep and the Period of Purple Crying

Based on the results of the review, the regions submitted detailed action plans with goals focused on child safety. The plans include how regions will accomplish the identified goals, who is responsible to complete

action items, the target due dates, and expected outcomes. Action items were identified across regions and included mentoring, participating in monthly case consultations, individual coaching, training, peer reviews, practice discussion, and monthly and quarterly case reviews by area administrators, supervisors and regional program and quality assurance (QA) staff.

The areas needing practice improvement in CPS-FAR are very similar to areas needing improvement in CPS-Investigations. Planning is underway to conduct CPS practice discussions with CPS-FAR and Investigative supervisors and area administrators, with one session in each region. These discussions are scheduled for late summer and fall 2016. The practice forums will focus on four or five safety-related practice areas, with the intent of developing strategies to improve practice in these areas.

Case review results can be found in appendix B.

Additional Activities for this Reporting Period

- Monthly case consultations conducted via video conference to facilitate statewide participation. Case
 consultation opportunities rotate, office-to-office, with caseworkers presenting cases. The monthly
 case consultations also include time for questions and clarification on CPS-FAR practice. During this
 reporting period, participation in these consultations has decreased. Several of the consultations were
 canceled because no cases were identified for staffing. CPS-FAR staff were surveyed to seek input on
 the consultations. The CPS-FAR HQ team will work with the CPS-FAR regional leads to make
 improvements and adjustments to the process.
- Weekly CPS-FAR Project Team meetings to discuss implementation, policy and practice, successes, and challenges as well as planning for future CPS-FAR related activities.
- Monthly meetings between the CPS-FAR Project Team and the regional CPS-FAR Leads. The leads share updates from their regions and local offices and bring issues to the attention of the CPS-FAR Project Team.
- Ongoing site visits to offices. The CPS-FAR Project Team conducts site visits to observe CPS-FAR operations at the local level, assess unmet training needs, and provide case consultation, with the goal of supporting caseworkers and striving for fidelity to the CPS-FAR model.
- Participation in monthly statewide CPS and Intake program manager meetings. The CPS-FAR Project
 Team also participates in monthly intake consultation calls with intake supervisors from across the
 state. The intake consultation calls assist in developing statewide consistency in screening intakes for
 CPS investigation and the CPS-FAR pathways.
- Bi-monthly meetings with the CPS-FAR Steering Committee, comprised of the CA Assistant Secretary, division directors including Program and Policy, Finance and Performance Evaluation, the Alliance for Child Welfare Excellence, and Casey Family Programs. The committee receives updates on implementation, CPS-FAR data, and serves as a decision-making body as needed.
- Monthly meetings with TriWest Group, the contracted evaluator of CPS-FAR. The meetings cover
 activities and work accomplished over the previous month, allow opportunities for information sharing
 and more recently the review of preliminary data.

III. Fiscal

Family Assessment Response Expenditures Services, Concrete Goods, Staffing				
January 2016 – June 2016	\$6,639,561			

Addressing Challenges to Implementation

<u>Intake</u>

The data below shows the percentage of intakes screened to both CPS-FAR and CPS-Investigation. Intake data projections suggest a 61/39 split (61% CPS-FAR and 39% CPS-Investigation). The regional variations are the result of changes to intake decisions made by intake supervisors and /or the assigning supervisors.

Statewide CPS Intake Screening Decisions January – June 2016							
Location	Total Number of CPS Intakes	Percent of CPS-FAR Intakes	Percent of Intakes Investigated				
Region 1	4,136	48%	52%				
Region 2	4,008	54%	46%				
Region 3	6,291	60%	40%				
Statewide	14,435	55%	45%				

Efforts to achieve consistency in screening and consensus in decision-making continue. These efforts include monthly intake consensus-building phone calls and monthly intake and CPS program leads meetings. Both of these allow for discussion about the screening tool, screening decisions, policy and practice.

Staff Retention

While many states have found that CPS-FAR caseworkers are more satisfied with their jobs and more likely to stay in their positions, this has not been the case in Washington State. Turnover is high in almost all programs. Staff turnover poses significant challenges to both CPS FAR model fidelity and training. Turnover of staff in leadership positions has impacted CPS-FAR offices, especially when movement happens right after or before implementation is to begin.

CPS-FAR Agreement

State law requires CPS-FAR families to sign a participation agreement. If the family does not want to sign the agreement, the case is transferred to investigation. In discussions with CPS-FAR caseworkers about the agreement, the CPS-FAR Project Team learned that many of the families who chose not to participate in CPS-FAR did not want to sign the agreement; some families indicated that signing the agreement meant they felt they were admitting to abusing or neglecting their child and/or agreeing to participate in services. While the agreement only asks parents to sign in order to acknowledge agreement to participate in CPS-FAR, the parent's perception of the agreement appears to be a barrier to signing.

CA continues to have concerns about the requirement of a signature and that cases may be transferred to an investigation when CPS-FAR is more appropriate for the family and the alleged incident. After some research with states that have differential response, it appears that no other state requires a parent to sign a written agreement in order to participate in the alternate intervention. CA will continue to seek the statutory remedy of eliminating the requirement of a signature.

The participation agreement which required the parent's initials to acknowledge various aspects of the agreement with a final signature was simplified. The revised agreement requires only a signature. Use of the revised agreement began February 2016.

Length of Time for CPS-FAR Intervention

CPS-FAR legislation allows for a CPS-FAR case to be open for 45 days for assessment with an extension up to 90 days for service provision with parental consent. CPS-FAR staff have consistently provided feedback that more time is needed for both assessment and service provision.

Several questions were added to the March 2016 CPS-FAR targeted case review in an effort to learn more about service delivery, length of CPS-FAR intervention, and whether the statutory timeframes present a barrier to service delivery in CPS-FAR.

The results suggest that:

- about 10% of the CPS-FAR families would have benefited from additional time (beyond 90 days) for service provision.
- 45 days is not enough time to complete the assessment work.

IV. Evaluation Status and Findings

TriWest has provided updated information on the status of the evaluation as well as findings for this report. This information can be found in appendix A.

V. Recommendations and Activities Planned for Next Reporting Period

 Launch two additional offices (King West and White Center) in October 2016. This will include holding a CPS-FAR preview session for supervisors and area administrators, and training of CPS-FAR caseworkers.

- Assess the readiness of the remaining offices and work with the CPS-FAR regional leads to identify and address barriers that could impact implementation.
- Train new CPS-FAR caseworkers hired into existing CPS-FAR offices as well as staff needing to be cross-trained.
- Conduct three regional practice discussions with CPS supervisors and Area Administrators.
- Implement "The Difference Game" pilot in three CPS-FAR offices. Work with TriWest to develop a process to evaluate the pilot.
- Conduct a statewide CPS-FAR case review in September 2016. Assess practice strengths and areas needing improvement.
- Conduct a targeted intake review of alleged physical abuse of four and five year olds in October 2016.
- Continue building community resources and relationships.
- Continue site visits to CPS-FAR offices. These visits include meeting with CPS-FAR workers, supervisors and area administrators and provide opportunities to answer questions and provide practice direction.
- Continue to gather feedback from caseworkers through site visits and surveys about the program's successes and challenges and how to improve training, policy, and support from the state and regional level.
- Continue to evaluate the intakes assigned to CPS-FAR and identify any trends for CPS-FAR intakes
 that transfer to investigations or result in a dependency. Assess regional variation in screening rates
 to CPS-FAR and investigations.
- Continue to work with TriWest to inform their evaluation.

VI. Program Improvement Policies

CA committed to implementing two child welfare program improvement polices as outlined in the terms and conditions of the IV-E waiver.

- 1. Procedures to Assist Youth in Foster Care to Reconnect with Biological Family Members: Inclusion in the State's Title IV-E plan of a description of the State's procedures for ensuring that foster youth, ages 16, and older are engaged in discussions regarding their desire to reconnect with biological family members, including during the development of transition plans required by the case plan and case review requirements of Section 475(1)(D) and 5(H) of the Social Security Act.
 - Explore whether the youth wishes to reconnect with his or her biological family, including parents, grandparents, and siblings, and if so, what skills and strategies the youth will need to successfully and safely reconnect with those family members;

- Provide appropriate guidance and services to assist youth who affirm a desire to reconnect with biological family members to safely and successfully achieve this goal; and
- When appropriate, make efforts to include biological family members in the reconnection effort.

Caseworkers encounter situations when youth express his or her desire to be with their bio-family and there are times that the caseworker will initiate the "re-establishing relationships with biological family members" conversation. The conversations include follow-up discussions on safety, well-being and permanency. The information may be incorporated in the case plan or the work may be embedded in practice.

CA will be implementing specific policy and procedures with an anticipated effective date of January 2017 regarding the practice of engaging youth. The policy will focus on maintaining and re-establishing family connections and will reference and align with current policies and procedures support the practice such as:

- Monthly Health and Safety Visits with Children policy Caseworkers and youth visits occur monthly.
 During these visits information is gathered on all aspects of the youth's life. Discussing parental
 relations is a very common conversation between the caseworker and youth. The caseworkers
 support the youth and give tools and ideas on how to move forward on re-establishing
 relationships needs with their biological families.
- <u>Family Team Decision Making Meetings policy</u> Prior to "returning home", the youth's team
 conducts a meeting to discuss a transition and support plan for the youth and family. The plan
 focuses on ensuring the safety of the youth during transition and when living at home. Family and
 youth relatives and supports are invited and expected to offer how they can support and help the
 family and youth if the need arises.
- Independent Living Program (IL) Youth who are engaged in an IL Program are connected to an IL worker who will assist the youth in bridging family connections by helping the youth identity potential positive connections and barriers to these connections. The IL worker will also be available to help facilitate interactions with family members. The IL worker is responsible for setting appropriate boundaries that meet the youth's needs for independence and connection to family.

Youth in the IL Program also learn about "relational permanency" through the Foster Club's Permanency Pact. Skills are taught on how to identify supports they may want or need to help them transition to adulthood. IL workers assist the youth in developing a list of people who may be willing to help with identified supports. The list may include current relationships or previous relationships such as family members. The IL provider talks to the youth about healthy relationships and establishing boundaries.

<u>CA Responsibilities to Dependent Youth 12 and older policy</u> and <u>Youth Petition for Reinstatement of Parental Rights policy</u>. Many youths have attorneys by the age of 16. Youth are able to meet with their attorneys to discuss case plans. If the youth expresses a desire to reconnect with family, the attorney will represent the child's position in court.

Shared Planning Meetings policy Beginning at 14, youth are active participants in their case planning. The youth attends shared planning meetings and court hearings. The youth may also invite two individuals to the meeting. The youth may express his/her ideas and what he/she would like to see happen in his/her life. Discussion of permanency is a dominant topic in the meetings. Linking bio-family's reconnections, safety, wellbeing and permanency, the participants can create a supported case plan for the youth.

In July 2016, the Shared Planning Meetings policy was updated for youth 16 and above, to discuss the child's connections with siblings and other relatives including discussion of skills and strategies to safely reconnect with any identified family members and guidance and services to assist with reconnecting.

 <u>Children Missing From Care policy</u> Some youth who are "Missing from Care" are connecting with bio-families. Circumstances that led to the youth's placement in out-of-home care may not be relevant at an older age. The family may have alleviated risks and safety concerns or there may be additional protective factors present. Caseworkers are reassessing safety risks and are using biofamilies for placement options for the youth. Support services can be provided to the family.

2. Increased Age Limit for Title IV-E Programs to 21

Washington State's Extended Foster Care (EFC) Program is a result of the state's efforts to further implement the <u>Federal Fostering Connections for Success and Increasing Adoptions Act of 2008</u>. It provides an opportunity for youth who are in foster care on their 18th birthday to continue to receive services until they turn 21.

Beginning in 2011, Washington State proposed legislation that defined the program criteria for qualifying youth aging out of the foster care system to participate in the EFC program and receive the benefits and case management assistance the program offers.

In 2013, <u>Washington state legislation</u>, facilitated the delivery of extended foster care services for any youth who is dependent in foster care at the age of eighteen years and who, at the time of his or her eighteenth birthday is in school, working full or part-time, or seeking to enter school. The final program eligibility criterion <u>was enacted in March 2015</u>. Under this criterion, which became effective July 1, 2016, youth qualify for the program regardless of their ability to engage in the previously established criteria if the youth has a documented medical condition.

Washington state law establishes EFC throughout the state. Washington state <u>EFC policy</u> stipulates that youth can participate from the day they become 18 upon exiting the foster care system; or voluntarily enter the EFC program prior to becoming 19 years old through a Voluntary Placement Agreement if they exit foster care when they become 18 years old. Children's Administration is committed to providing these former youths the resources, case management, and guidance for a successful transition to adulthood.